

7/2
3-17-04

DOCKET: FIS9-2001-0180US1

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR:	N. Brandon et al.)	EXAMINER:	Hirl, J.P.
)		
SERIAL NO.:	09/881,820)	ART UNIT:	2121
)		
FILING DATE:	June 15, 2001)	DATE:	March 5, 2004
)		
FOR:	Method for Designing)		
	a Knowledge Portal)		

AMENDMENT

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Technology Center 2100

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P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

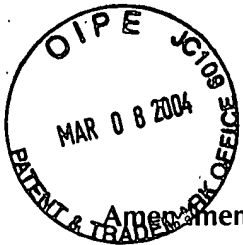
Responsive to the Office Action mailed December 11, 2003, please amend the application as follows:

03/10/2004 WRBDELRI 00000129 090458 09881820
01 FC:1202 108.00 DA

2121 \$

IBM Docket No. FIS920010180US1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Amendment Response/Transmittal

In re application of: N. Brandon et al.

Serial No. 09/881,820

Filed: June 15, 2001

For: Method for Designing a Knowledge Portal

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

DeLIO & PETERSON, LLC
121 Whitney Avenue
New Haven, CT 06510-1241

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Sir:

Date: March 5, 2004

Transmitted herewith for filing is an **Amendment/Response** in the above-identified Application.

- No additional fee is required.
- The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	26*	MINUS	**20	= 6
INDEPENDENT	2*	MINUS	***3	= 0
<input type="checkbox"/> 1ST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS				

Other Than Small Entity	
RATE	ADDITIONAL FEE
x \$ 18.00 =	\$ 108.00
x \$ 86.00 =	\$
\$290.00	\$
TOTAL	\$ 108.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest No. Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

Please charge the Assignee IBM Corporation Deposit Account No. **09-0458** in the amount of \$ 108.00. A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **09-0458**. A duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 C.F.R. §1.16.

Any patent application processing fees under 37 C.F.R. §1.17.

CERTIFICATE OF MAILING UNDER 37 CFR 1.8
I hereby certify that I am depositing the enclosed or attached correspondence with the United States Postal Service as first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
Name of person mailing paper: Barbara Browne
Signature: *Barbara Browne* Date: 3/5/04

Respectfully submitted,

BY:

Peter W. Peterson

Attorney: Peter W. Peterson
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